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EXHIBIT 3
DATE 2-5-07
HB HB 359

February 5, 2007

House Human Services Committee
Montana Legislature

Re: Opposition to HB359

Honorable Members of the House Human Services Committee:

I am a pathologist living and practicing in Billings, MT. I represent Rocky Mountain Health Network (RMHN) and my local pathology group. RMHN is a large provider network comprised of 500 health care providers including 261 physicians, six critical access hospitals and one large hospital in Billings. I am a member of the RMHN Board and also the Chair of its Legislative Committee. My pathology group is comprised of four pathologists. We are Medical Directors for several hospital clinical laboratories across the state, including the communities of Chester, Harlowton, Miles City, Wolf Point, Poplar, Lewistown and St. Vincent Healthcare in Billings. We are also Medical Directors of the local laboratory of Quest Diagnostics, a large national reference laboratory. As a Medical Director of a clinical laboratory, I am responsible for the overall operation of the laboratory, ensuring the quality of test results, and I interface with health care workers when they have questions or issues that involve the laboratory.

While I agree with the sponsor's general philosophy that people need to have more autonomy and responsibility for their health and healthcare, HB359 will not significantly impact the public's ability to do so, and is likely to cause more harm than good.

Laboratories in Montana already provide laboratory testing directly to the public. This is provided routinely on a daily basis in most of the larger communities, and through health fair testing in most of the smaller communities. Test menus currently being offered directly to the public are being done so in a responsible manner, with careful consideration of cost/benefit to the patient, as well as how abnormal results are followed up with a patient. Interestingly, test menus being offered by different institutions across the state are remarkably similar, despite their being derived independent of one another. This fact speaks strongly to our assertion that only a limited menu of tests is appropriate for direct public access.

Pathologists provide oversight of laboratory quality and consultation services to practitioners regarding laboratory issues. Neither laboratories nor pathologists provide interpretation or consultation services to patients, because neither has established a relationship with the patient. Providing limited information about a test on a piece of paper or other means is insufficient. Laboratory results need to be discussed with a patient, taking into consideration numerous factors including their family and health

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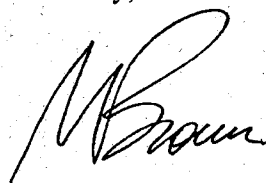
HOYLE E. SETZER, M.D.

history, physical examination findings and other ancillary information. Laboratory tests are an ancillary service to aid a provider in diagnosis, assessment and treatment of a disorder. Laboratory testing is only one piece of the puzzle practitioners must consider in their approach to a patient.

Many lab tests are developed and intended for use on specific patient populations, and the accuracy of those results are similarly based on that assumption. If testing is allowed for the general public use, then result accuracy is jeopardized and we increase the risk of giving patients bad information, that could lead to erroneous diagnoses or additional unnecessary evaluation that increases the cost of healthcare.

Laboratories and the medical community have a responsibility for the public's health, as does the Legislature. SB359 mandates us to act in an irresponsible manner and assume the liability for it. The legislature will be doing the public a disservice by passing this bill. I therefore ask the Human Services Committee to recommend DO NOT PASS on HB359.

Sincerely,

A handwritten signature in black ink, appearing to read 'M. Brown', with a stylized, cursive script.

Michael Brown, MD
President and Medical Director
Yellowstone Pathology Institute

Chair, Legislative Committee
Rocky Mountain Health Network